KW4 ONTARIO HEALTH TEAM

Report to
Steering Committee

EXECUTIVE DIRECTOR

MARCH 2024

Ashnoor Rahim
Executive
Director

GOVERNANCE

STRATEGIC PLANNING

Work on the development of KW4 OHTs inaugural strategic plan continued during the month of March.

On March 20, 2024, members of the KW4 OHT, along with strategic partners and community members, participated in a virtual planning session.

This facilitated session was highly interactive and we are grateful for the level of engagement by the 57 participants.

During the session we reviewed and reached agreement in principle on the vision, mission, values, pillars, foundational enablers, strategic priorities, and goals. We also assessed alignment of the strategic priorities and goals with member organization strategies, the needs of our local community, and system-level priorities. We identified the role organizations will take in leading and/or significantly contributing to each of our priorities. We also determined the areas where we wish to be more ambitious, transformational, or edgy based on our local context and then concluded with closing remarks and next steps.

The input gathered from this session will help inform the next iteration of the plan. In April 2024, we will be seeking final approval of the Strategic Plan. The launch of the Strategic Plan is being planned for May 2024.

COMMUNICATIONS HIGHLIGHTS

AGING WELL IN WELLESLEY INFORMATION AND ACTIVE LIVING FAIR

On March 13th, 2024, the KW4 Ontario Health Team attended the Aging Well in Wellesley Information and Active Living Fair. The event had 28 vendors and was attended by over 150 participants.

During the fair, a presentation was given on Rural Farming and Mental Wellness, which provided information to farmers on how to access mental health resources. The Waterloo Regional Police Services (WRPS) also provided valuable information on community safety, offering tips to keep participants and their homes secure.

A presentation panel was held where various organizations shared information about the resources and services available to seniors through their programs.

Attendees also had the opportunity to network and explore local organizations' booths providing senior services.

COMMUNICATIONS HIGHLIGHTS

HEALTH SYSTEM PERFORMANCE NETWORK (HSPN) COMMUNITY OF PRACTICE PRESENTATION

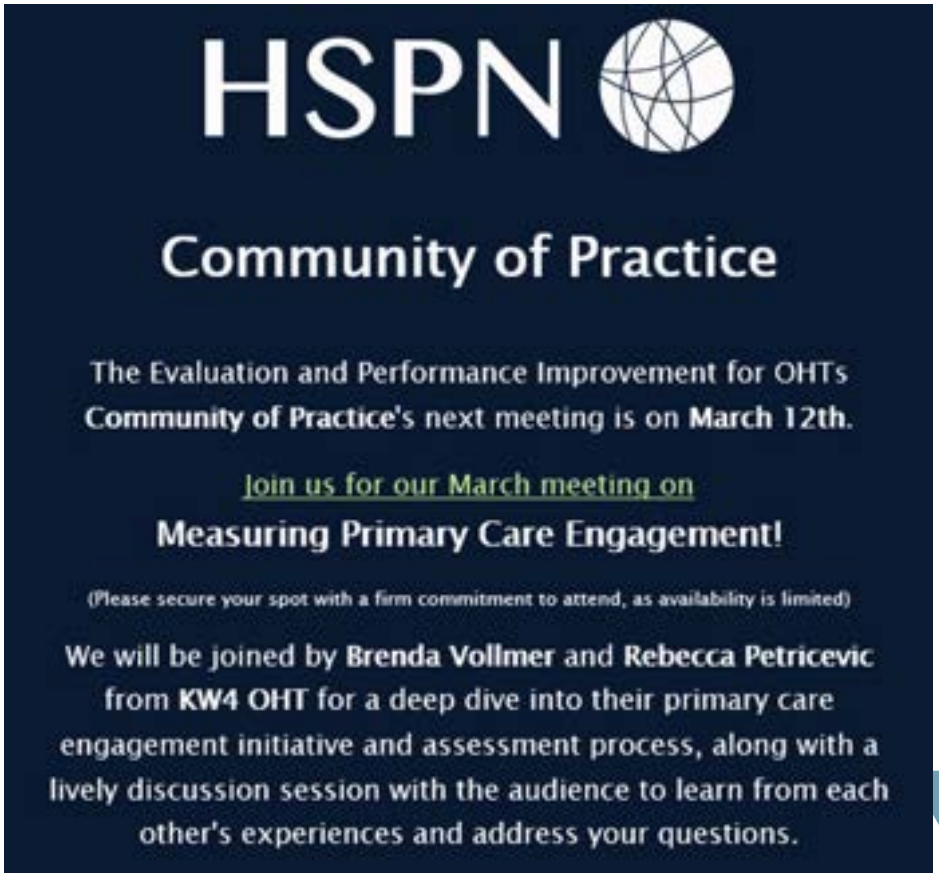
On March 12, 2024, the KW4 OHT presented to a group of approximately 50 people from OHTs across the province to discuss our primary care engagement initiatives and assessment process.

We discussed our geography, our population growth rate, as well as the makeup of our local primary care physician by funding model type.

We reviewed our primary care newsletter, our clinician summits, and the great work happening to develop the KW4 Primary Care Network along with how we measure success of these initiatives.

As this was for a Community of Practice, we included our methodologies, how we collect information practically, and how we could potentially improve our methods.

The group raised questions that encouraged lively discussion and we have received very positive feedback from HSPN and Ontario Health. We have benefitted greatly from participating in this Community of Practice and were grateful for the opportunity to contribute.



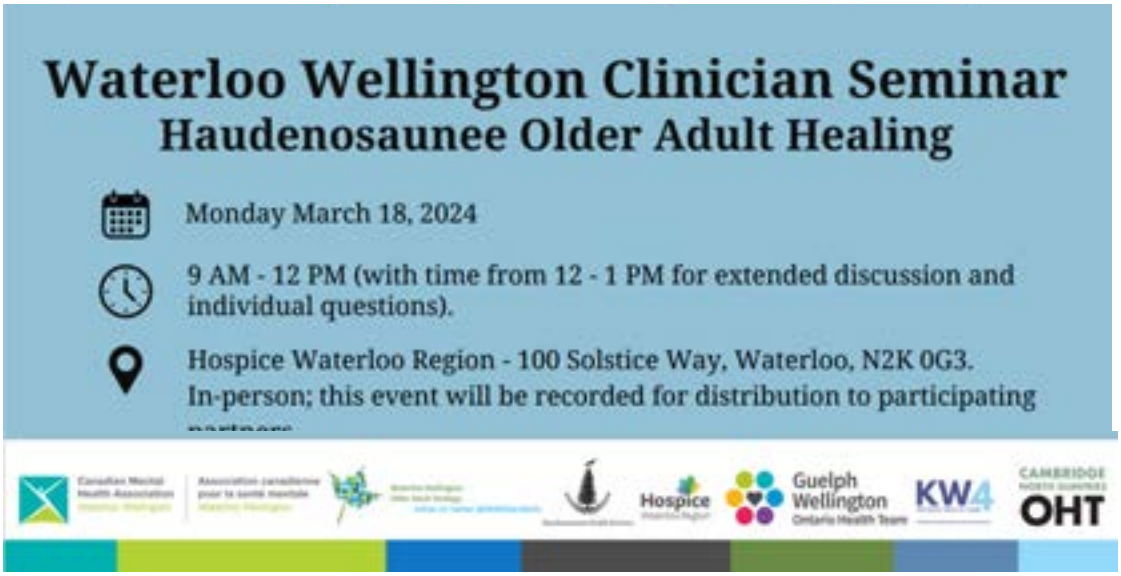
COMMUNITIES AND STAKEHOLDER WORK

WATERLOO WELLINGTON HAUDENOSAUNEE OLDER ADULT HEALTH CLINICIAN SEMINAR

On March 18, 2024, KW4 OHT participated in the Waterloo Wellington clinician seminar focused on Haudenosaunee older adult healing. Special thanks to Hospice Waterloo Region for hosting the event.

We had the privilege of hearing from Sonny Hill, Traditional Advisor for Mohawk (Six Nations) and Dr. Amy Montour, local primary care physician, Oneida (Six Nations). Powerful stories were used to help guide our learnings about current Haudenosaunee older adults' social and distal determinants of health, the Ionkwatákarí:te (we are healthy) approach to healing and using a Two-Eyed seeing method which braids together Haudenosaunee and biomedical approaches.

The session allowed us to develop a deeper understanding of the Haudenosaunee perspectives on health and healthcare needs and how using a two eyed seeing approach to healthcare can enrich the provider - client relationship and improve health outcomes.



KEY AND EMERGING ISSUES
DIGITAL HEALTH UPDATES

System Navigation

The Waterloo Region Front Line Navigator Community of Practice met in March to discuss improvements in connecting and communicating across organizations and navigators. We reviewed the number of provincial health and social services directories available, the forthcoming Provincial Health and Social Services Directory that will be available on Health811 and discussed different approaches and opportunities to connect locally with one another. We assessed the different mechanisms and resources navigators are using to gather and share client/patient information with one another, and the most common challenges associated with access and sharing of personal information and/or personal health information. The members had a chance to highlight bright spots they have experienced lately and learn of upcoming community events. The next meeting will be held in May with the agenda in development based on the March meeting lessons and takeaways.

KEY AND EMERGING ISSUES
DIGITAL HEALTH UPDATES

Health811 Annual Roadmap – Ideation Sessions

The Health811 Provincial team have extended an invitation for the opportunity for our partners to provide input into the Health811 Annual Roadmap.

The annual roadmap process helps Health811 outline future product features and functionality for how the service will evolve. Your feedback in this discussion is crucial in generating innovative ideas to help guide the roadmap design and evolution of the Health811 service.

The roadmap process begins with the spring Ideation Sessions in April, facilitated by the Health811 team. In these sessions, you will have the opportunity to share your perspectives and put forward any ideas you have for the team to consider. After the engagement sessions are completed, a summary of the themes from all sessions will be shared to help inform enhancements for next year. Participants will be asked to complete a survey in May, prioritizing the themes and change ideas for next year. Lastly, Health811 will also be inviting users to come back together to help co-design enhancements in June.

Please click on the link to register for a virtual session by no later than March 31, 2024. If you receive an email telling you that your registration has been rejected, please select another session as the session you selected is full.

KEY AND EMERGING ISSUES

DIGITAL HEALTH UPDATES

Health811 Annual Roadmap – Ideation Sessions (cont'd)

Please select only one ideation session to attend.

Morning Ideation Sessions – 10:00am-11:30am (EST)

April 9
April 10
April 16 (Session will be facilitated in French for FLS Participants)
April 17
April 18
April 23
April 24

Afternoon Ideation Sessions – 2:00pm-3:30pm (EST)

April 10
April 11
April 16
April 17
April 18
April 23 (Session will be facilitated in French for FLS Participants)
April 25

PROGRESS AND RESULTS
QUARTERLY PERFORMANCE REPORT

As part of KW4's September 2020 application to become an OHT, we were required to describe how our team will measure and monitor our success. Members endorsed the measures shown in the snapshot of our performance below, which we now report on quarterly.

KW4 OHT is performing at or better than the targets we have set for two of our performance measures including caregiver distress among home care clients and hospitalization for ambulatory care sensitive conditions.

KW4 OHT is not meeting the target set for two of our performance measures including alternate level of care (ALC) days and frequent emergency room visits for mental health and addictions.

Table 1 below provides a summary of this quarter's performance.

#	Indicator	Unit of Measure	Reporting Period	Proposed Target	Current Performance (lower is better)	Status	Change since last report
1	Caregiver distress among home care clients	%	Dec 2023	<= 56%	53.3%	●	No change from 53.3%
2	Hospitalization rate for conditions that can be managed outside hospital (asthma, diabetes, chronic obstructive pulmonary disease, heart failure, hypertension, angina and epilepsy)	Rate per 100,000 population	Nov 2023	<= 20.4 monthly (61.2 quarterly) (244.8 annually)	18.3	●	Slippage from 16.1
3	Total ALC (Acute and Non-Acute)	%	Dec 2023	<=16.7%	17.7%	●	Slippage from 15.7%
4	Frequent Emergency Room Visits for Help With Mental Health and/or Addictions	%	Dec 2023	<=10.0%	13.3%	●	Improvement from 15.3%

Performance Corridors: ● Greater than 10% of Target ● Within 10% of Target ● Meets Target

The full report, including contributing factors and initiatives currently underway, or planned for the near future is available here.

PROGRESS AND RESULTS

COLLABORATIVE QUALITY IMPROVEMENT PLAN (CQIP)

A cQIP is a formal commitment to quality that an OHT makes to their community. It aligns both provincial and local health system priorities with the quintuple aim of reducing costs, improving population health, improving patient experience, improving provider experience, and improving health equity through the consideration of populations most at risk.

The 2024/25 cQIP, includes a:

- Progress Report which highlights how KW4 OHT, along with its partners, improved care in our community in 2023/24 as it relates to cQIP indicators.
- Narrative Report that describes our successes, how we have engaged with patients, family and care partners as well as community members in co-designing activities for cQIP initiatives and how we are supporting unattached patients
- Workplan which is the forward-looking portion of the cQIP that identifies indicators, quality improvement targets, and planned improvement initiatives or change ideas that KW4 OHT will commit to for the coming year along with the organizations that will collaborate on these initiatives.

We are thrilled that we have 60 collaborators on our cQIP. Together we have identified 24 improvement initiatives.

On March 20, 2024, Members of the KW4 OHT approved our cQIP for the 2024/25 fiscal year. The various components of the cQIP can be found here.

GENERAL UPDATES

OUR KW4 OHT TEAM

Goodbye and thank you to Dawood Amjad

This month we say goodbye to Dawood Amjad who joined the OHT about a year go to help us with finance and operations matters. We would like to acknowledge and thank Dawood for his contributions and wish him well on his next career step.

Goodbye and thank you to Nicole Naccarato

This month we also say goodbye to Nicole Naccarato. Nicole joined the KW4 OHT in June of 2023 as a co-op student and then transitioned to a temporary casual position in September of 2023. Nicole has been instrumental in the development of our strategic plan, and we would like to thank her for all her efforts. We wish Nicole all the best as she wraps up her Concurrent Master of Business Administration (Co-op) and Master of Public Health program.

Newcomer App Project Status Report

The objective of the Newcomer App project is to develop an app to improve Newcomer's ability to self-navigate local health and social services with accurate, up to date information. Our goal is to empower Newcomers to better participate in their own health and wellness journey and help guide them to the most appropriate care and support for their given circumstance, 24 hours a day, 7 days a week, in the language of their choice.

Executive Sponsor: Dr. Charmaine Dean, University of Waterloo
Project Lead: Dr. Catherine Burns, University of Waterloo
Project Manager: Aderonke Saba
Report Due Date: March 22, 2024

Overall Status		
	Status	**Comments (Comments required for a Yellow or Red Status)**
Scope		
Schedule		
Budget		
Quality		
Legend	On Track	At Risk / Serious Concerns

Milestones — Legend: On Track | At Risk | Overdue | Complete ✓

#	Project Milestone	Status	Target Due Date (yyyy/mm/dd)	Revised Date (yyyy/mm/dd)	% Complete	Comment
1	Approval of Project Charter	✓	2023/05/18	2023/06/30	100%	Completed.
2	Project Kickoff	✓	2023/01/23	NA	100%	Completed.
3	Project Agreement/ signed MOU by KW4 OHT and University of Waterloo	✓	2023/03/01	NA	100%	Completed.
4	Ethics Approval	✓	2023/05/03	NA	100%	Completed.
5	Interview data findings/ outcomes	✓	2023/10/31	NA	100%	Completed.
6	Co-design findings/ Design document	✓	2023/12/30	NA	100%	Completed.
7	Initial Prototype design	✓	2024/01/31	NA	100%	Completed.
8	Prototype Evaluation report		2024/04/30	NA	70%	Prototype evaluation is in progress. To date, 8 newcomers and 8 organizations have participated in the prototype evaluation session. Conversation with organizations is ongoing for collaboration on the working prototype.
9	Revised Prototype design		2024/05/31	NA	60%	The visual prototype is being refined based on the feedback from the evaluation sessions.
10	Hire Software development company/Programmer	✓	2024/01/01	NA	100%	Completed.
11	App Development		2024/04/30	NA	50%	Work is ongoing on the development of the backend and front end of the working prototype. Conversation is ongoing with Meta to utilize their open-sourced seamless translation models for translation on the working prototype.
12	Quality Assurance and Testing		2024/05/31	NA	0%	
13	Deployment and Support		2024/12/30	NA	0%	
14	Field Evaluation of App		2024/12/30	NA	10%	The application for ethics extension for the field evaluation is under development.
15	Project Closeout		2024/04/21	NA	60%	Sustainability Plan for the project is under development.

Neighborhood Integrated Care Team Project Status Report

The Neighborhood Integrated Care Team (NICT) project seeks to develop and implement a NICT model to improve access to health services and proactively support community members thereby preventing unnecessary emergency department visits and potential hospitalizations. The main objectives of the project are:

- Determine use of resources in the communities we serve to improve health outcomes
- Develop and implement NICT model to improve access to health services and support high-risk seniors and adults
- Improve overall access to community Mental Health & Addiction services

Executive Sponsor: John Neufeld, House of Friendship
Project Lead: Dauda Raji, House of Friendship
Project Manager: Aderonke Saba
Report Due Date: March 22, 2024

Overall Status		
	Status	**Comments (Comments required for a Yellow or Red Status)**
Scope		
Schedule		
Budget		
Quality		
Legend	On Track	At Risk / Serious Concerns

Milestones — Legend: On Track | At Risk | Overdue | Complete (✓)

#	Project Milestone	Status	Target Due Date (yyyy/mm/dd)	Revised Date (yyyy/mm/dd)	% Complete	Comment
1	Approval of Project Charter.	✓	2023/05/31	2023/11/30	100%	Completed.
2	Formalize memorandum of Agreement between KW4 and project sponsor, House of Friendship.	✓	2023/02/01	NA	100%	Completed.
3	Establish project Leadership Advisory Committee (LAC)	✓	2022/12/01	NA	100%	Completed.
4	Develop Patient Personas, Journey Maps, and Integrated Care Pathways (ICPs).	✓	2023/06/20	2023/07/14	100%	Completed.
5	Develop a Neighborhood Integrated Care Team Model for Newcomers and Residents in priority neighborhoods		2023/12/31	2024/04/30	80%	Recruitment for the second session of the Diabetes Fit Program is underway. Collaborating with the Neighborhood Nursing Team to recruit participants from the priority neighborhoods.
6	Develop Social Prescribing model for the project.		2023/12/31	2024/04/30	80%	Diabetes Pathway- Incorporation of diet education and exercise for clients with Pre-diabetes and Type 2 diabetes.
7	Deployment of digital enablers for service providers to efficiently and effectively coordinate patient care on the project.	✓	2023/12/31	NA	100%	Completed.
8	Establish project implementation team(s).	✓	2023/06/23	2023/12/31	100%	Completed.
9	Complete detailed implementation plan	✓	2023/07/07	2024/02/31	100%	Completed.
10	Complete project logic framework including indicator matrix and performance measures.	✓	2023/07/07	NA	100%	Completed.
11	Develop a communication strategy for the project.	✓	2023/08/28	2023/12/31	100%	Completed.
12	Conclude evaluation of effectiveness and efficiency of the NICT model.		2024/04/30	NA	70%	Key Performance Indicators are being measured and tracked through the detailed project status report.
13	Initiate formal closeout processes.		2024/04/30	NA	80%	Sustainability Plan created. It will be presented for information and feedback at the NICT LAC closeout meeting on March 28.

Primary Care Integration and Governance Project Status Report

The Primary Care Integration and Governance Project aims to support primary care providers to better lead, participate and co-design health system integration activities with a patient-first focus. This project also aims to increase overall access to preventative care with a focus on reducing inequities for individuals in our priority populations.

Executive Sponsor: Dr. Sarah Gimbel, New Vision Family Health Team
Project Lead: Dr. Neil Naik, Regional Primary Care Lead
Project Manager: Rebecca Petricevic
Report Due Date: March 22, 2024

Overall Status	
Status	**Comments (Comments required for a Yellow or Red Status)**
Scope	
Schedule	
Budget	
Quality	

Legend On Track | At Risk | Serious Concerns

Milestones **Legend** **On Track** | **At Risk** | **Overdue** | **Complete** ✓

#	Project Milestone	Status	Target Due Date (yyyy/mm/dd)	Revised Date (yyyy/mm/dd)	% Complete	Comment
1	Approval of Project Charter	✓	2023/04/30	2023/09/19	100%	
2	Project Agreement/MOU signed by KW4 OHT and New Vision FHT.	✓	2023/01/10	NA	100%	
3	Project Planning and Project Kick-off	✓	2023/04/30	NA	100%	
4	Environmental Scan Complete	✓	2023/04/30	NA	100%	
5	Primary Care Network Development/ Governance Consulting report complete	✓	2023/04/30	2023/07/30	100%	
6	Preventative Cancer Screening initiatives implemented		2024/03/29	2024/05/31	85%	The GRT ads continued in February and March. Poppy Bot is completing final testing before launching the first pathway. The next two pathways should be launched soon after. Evaluation is scheduled to begin 8 weeks after the final pathway is implemented.
7	Clinician Engagement initiatives implemented		2024/01/31	2024/03/29	95%	Planning for the next Clinician Summit has begun and we are exploring CME accreditation for the sessions.
8	Primary Care Network developed		2024/03/31	2024/06/14	60%	The PCN Development Committee has been working on refining the by-laws and we expect an updated version in early April. The Committee has created communications to begin recruiting members. They are also working with the OHT Communications team to create a webpage.
9	Care pathways initiatives implemented	✓	2024/01/31	NA	100%	
10	Community Support Service Navigation		2024/03/31	2024/08/31	55%	The team continues to expand and onboard new clinicians. They are exploring ways to enhance

Primary Care Integration and Governance Project Status Report

						connections with existing resources. They plan on doubling the number of clinicians supported by the end of April.
11	Interim Evaluation Report complete	✓	2024/02/29	NA	100%	Final data shared with the Leadership Action Committee in advance of the last meeting.
12	Sustainability Plan developed	✓	2024/03/29	NA	100%	Options for sustainability of project initiatives discussed with the project leadership and they agreed on a method to support primary care engagement until the PCN is ready.
13	Identify opportunities to scale and spread to other providers and to other neighbourhoods	✓	2024/02/29	NA	100%	
14	Project Closure/Lessons Learned		2024/03/31	2024/04/30	5%	